



Utah Interpreter Program

Application for Educational Interpreter Performance Assessment (EIPA) Certification Recognition

Please Print!

Name	Last	First	M.I.	Date
				New Address? Y N
Address				
City		State	Zip Code	
()		()		
Phone (home)		Phone (cell/other)		
/ /				
Date of Birth*		Social Security Number*		E-mail address
Male	Female			
(please circle)				

***PLEASE NOTE: This information is kept strictly confidential, and is used for testing identification only!**

Please complete all that apply:

1. Date Utah Written Exam taken and passed _____
(please include a photocopy of pass letter for verification)
2. Date EIPA Written Test taken and passed _____
(please include a photocopy of pass letter for verification)

Elementary EIPA Score				
Roman I	Roman II	Roman III	Roman IV	Total Score
				<input type="text"/>

Secondary EIPA Score				
Roman I	Roman II	Roman III	Roman IV	Total Score
				<input type="text"/>

Please include a photocopy of EIPA certificate for verification.

- ☐ **YES**, you may publish my name and contact information in the Utah Certified Interpreter List / UIP website.
- ☐ **NO**. Do not publish my contact information. I understand only my name and level will be published.

**All of the information included on this application is true and correct
to the best of my knowledge.**

Signature

Date

**Make check for
recognition fee
payable to:**

Utah Interpreter Program
5709 South 1500 West / Taylorsville UT 84123-5217
801.263.4860 / 800.860.4860 (In Utah)
www.aslterps.utah.gov

November 2004

☐ Access

☐ Reviewed

☐ Approved